

**LINE TIGHTNESS TEST**

**KENTUCKY  
DEPARTMENT  
FOR  
ENVIRONMENTAL  
PROTECTION**

*Mail completed form to:*  
**DIVISION OF WASTE MANAGEMENT  
 UNDERGROUND STORAGE TANK BRANCH  
 200 FAIR OAKS LANE, SECOND FLOOR  
 FRANKFORT, KENTUCKY 40601  
 (502) 564-5981**  
<http://waste.ky.gov/ust>

**FOR STATE USE ONLY****UST FACILITY INFORMATION****TESTER INFORMATION**

Agency Interest (AI) Number:

Tester Name:

UST Facility Name:

Certification #:

Expires:

Physical Address:

 Tester Certified By: ☐ Tank Manufacturer  
 [Mark all that apply] ☐ Test Equipment Manufacturer

City, County, Zip:

Company Name:

UST Owner:

Phone Number:

Owner Phone Number:

Tester Signature:

**PIPING INFORMATION**
 Piping Material: ☐ Steel ☐ Fiberglass ☐ Flexible Thermoplastic ☐ Semi-Rigid Piping Configuration: ☐ Single Wall ☐ Double-Wall

 Piping Manufacturer/Model: Piping Type: ☐ Pressurized ☐ Suction

 Piping Release Detection Method: ☐ ELLD ☐ Annual Line Tightness Testing ☐ SIR ☐ Interstitial Monitoring ☐ Other:
**LINE TIGHTNESS TEST METHOD INFORMATION**

Test Method:

Max. Pipe Capacity:

Leak Threshold: ☐ 0.05 gph ☐ 0.01 gph ☐ Other:

Recommended Test Pressure:

Min. Test Duration:

**TESTING EVENT INFORMATION**
 Reason(s) for Test: ☐ Routine Annual ☐ Routine Tri-Annual ☐ Suspected Release ☐ New Installation ☐ Repair ☐ DEP Directed
**Date of Test:**

Time Arrived at UST Facility:

Date Next Test Due:

 Method of Piping Isolation During Test: ☐ Functional Element ☐ Isolation Plug ☐ Ball Valve ☐ Other:
**PRE-TEST DATA**

Line # / Product (Example: L1/RUL)	Piping Length (ft)	Operating Pressure (psi)	# of Connected Dispensers	# of Flex Connectors	Calculated Max. Bleedback (gal)	Measured Bleedback (gal)	Pretest Duration (min)

**LINE TIGHTNESS TEST DATA**

Line # / Product (Example: L1/RUL)	Time (military)	Pressure (psi)		Volume (gallons)			Line Tightness Test Results (Pass/Fail)	Secondary Containment Test Results (Pass / Fail / N/A)
		Before	After	Before	After	Net Change		

**COMMENTS**

Note any repairs, retests, or unusual test conditions

If you have questions on how to fill out this form or to request a review of UST facility records, please contact the UST Branch at (502) 564-5981 or visit our website at <http://waste.ky.gov/ust>.

**UST SYSTEM OWNER SHALL RETAIN A COPY OF THIS FORM**